

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Akira

Middle Name::

Family Name:: ISHIBASHI

Name Suffix::

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: c/o MITSUBISHI DENKI KABUSHIKI KAISHA,
2-3, Marunouchi 2-chome, Chiyoda-ku,

City of Mailing Address:: Tokyo

State or Province of Mailing
Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing
Address:: 100-8310

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Hiroki
Middle Name::	
Family Name::	OKAZAWA
Name Suffix::	
City of Residence::	Tokyo
State or Province of Residence::	
Country of Residence::	Japan
Street of Mailing Address::	c/o MITSUBISHI DENKI KABUSHIKI KAISHA, 2-3, Marunouchi 2-chome, Chiyoda-ku,
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	100-8310
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Masahiro
Middle Name::	
Family Name::	NAKAYAMA
Name Suffix::	

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: c/o MITSUBISHI DENKI KABUSHIKI KAISHA.
2-3, Marunouchi 2-chome, Chiyoda-ku,

City of Mailing Address:: Tokyo

State or Province of Mailing Address::

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 100-8310

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Tadashi

Middle Name::

Family Name:: SAITOU

Name Suffix::

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: c/o MITSUBISHI DENKI KABUSHIKI KAISHA,
2-3, Marunouchi 2-chome, Chiyoda-ku,

City of Mailing Address:: Tokyo

State or Province of Mailing Address::

Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 100-8310

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2005/003745	03/04/05

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2004-070787	03/12/04	Yes

Assignee Information

Assignee Name:: MITSUBISHI DENKI KABUSHIKI KAISHA
Street of Mailing Address:: 2-3, Marunouchi 2-chome, Chiyoda-ku,
City of Mailing Address:: Tokyo
State or Province of Mailing Address::
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 100-8310